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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR

	Attorney [Docket N	ο.	402981/SOGA			
	Client Reference No.				96		
	First Inventor		Ke	mpei SEKI	223		
Ì	Title	FREQUENCY MEASURING DEVICE					

1.5	3(b))	L	Title				LACCIAIT	O DEVICE	
			Ехрі	ess Ma	<u>il</u> Label	No.			
APPLICATION ELEMENTS			ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1.	Utility Patent Application Transmittal			ACCOMPANYING APPLICATION PARTS					
	Form	10.	Ø	Applica	ant regu	iests ear	ly publicat	ion.	
2.	Applicant claims small entity status. See 37 CFR 1.27.				e public		e under 37		
3.	Specification (including claims and abstract) [Total Pages 18]				neet and	document			
4.	Drawings [Total Sheets 20]	12.	Ш			o) Stater	nent (wher	n there is	
5.	Combined Declaration and Power of Attorney [Total Pages 3] a. Newly executed b. Copy from prior application [Note Box 6 below] i. Deletion of Inventor(s) Signed statement attached deleting inventor(s) named in the prior application	14.15.16.		Power English Informa S Foo Co Prelimi	n Trans ation Di rm PTC pies of nary Ar	lation Do sclosure 0-1449 Listed D nendme		it (IDS)	
6.	Incorporation by Reference: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b is considered as part of the disclosure of the accompanying application and is hereby incorporated by reference.			(Should I Claim of Docum Reques 122(b)	be specif of Priori nent(s) st & Ce	rtification) (Form l	zed)		
7.	Application Data Sheet. See 37 CFR 1.76								
8.	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)								
9.	Nucleotide and/or Amino Acid Sequence Submission a.								
21.	21. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below: Continuation Divisional Continuation-in-part of prior application no.								

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 402981/SOGA Client Reference No.

APPLICATION FEES							
BASIC FEE				\$770.00			
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE				
Total Claims	4 -20=		x \$18.00	\$			
Independent Clai	ms 1 - 3=		x \$86.00	\$			
	ndent Claim if applicable		+\$290.00	\$			
		Total of above	calculations =	\$770.00			
-	\$()						
Assignment fe	\$40.00						
Early publicati	on fee if applicable		\$				
	TOTAL =	\$810.00					
 Please charge my Deposit Account No. 12-1216 in the amount of \$810.00. A check in the amount of \$ is enclosed. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 12-1216: a.							
26. CORRESPONDENCE ADDRESS							
□ Customer Nu □			yand, Reg. No.	29,458			
		Leydig, Voi	t & Mayer				
	23548		700 Thirteenth Street, N.W., Suite 300				
	n, D.C. 20005-39 3770 (telephone						
)						
Name Jeffrey A. Wyand, Reg. No. 29,458							
Signature							
Date February 3, 2017							

Utility Transmittal (Revised 10/1/03)